

QUARTER #

99
0906220

For the Third Quarter Only: please check if applicable:

Note: Use the Business Notification Change Form (Form 941BN-ME) on page 3 to change your business name or address.



Mail return and check to:
Maine Revenue Services
P.O. Box 1061
Augusta, ME 04332-1061

Office use only PWD



Withholding
Account No.:

Period Covered: - - to - -

MM DD YY MM DD YY



99

* 0906224 *

Schedule 1

Reconciliation of 900ME Voucher Payments or Electronic Payments of Income Tax Withholding

For employers or non-payroll filers required to remit withholding taxes on a semiweekly basis.

[illegible]

5. Withholding Amount

Subtotal C.....\$ 1, 111, 111 . 11

6. Payment Amount

Subtotal C\$ _____

Total (Enter on Form 941ME,
line 2)\$, , .

SCHEDULE 2 (FORM 941ME) 2009

Name: _____

Withholding
Account No.: _____

Period Covered: _____ to _____
MM DD YY MM DD YY



99

0906221

Schedule 2 - Income Tax Withholding Listing

7. Name of Payee (Last, First, MI)	8. Social Security Number	9. Maine Income Tax Withheld during the Quarter
a. _____	_____ - _____ - _____	\$ _____ , _____ . _____
b. _____	_____ - _____ - _____	\$ _____ , _____ . _____
c. _____	_____ - _____ - _____	\$ _____ , _____ . _____
d. _____	_____ - _____ - _____	\$ _____ , _____ . _____
e. _____	_____ - _____ - _____	\$ _____ , _____ . _____
f. _____	_____ - _____ - _____	\$ _____ , _____ . _____
g. _____	_____ - _____ - _____	\$ _____ , _____ . _____
h. _____	_____ - _____ - _____	\$ _____ , _____ . _____
i. _____	_____ - _____ - _____	\$ _____ , _____ . _____
j. _____	_____ - _____ - _____	\$ _____ , _____ . _____
k. _____	_____ - _____ - _____	\$ _____ , _____ . _____
l. _____	_____ - _____ - _____	\$ _____ , _____ . _____
m. _____	_____ - _____ - _____	\$ _____ , _____ . _____
n. _____	_____ - _____ - _____	\$ _____ , _____ . _____
o. _____	_____ - _____ - _____	\$ _____ , _____ . _____
p. _____	_____ - _____ - _____	\$ _____ , _____ . _____
q. _____	_____ - _____ - _____	\$ _____ , _____ . _____
r. _____	_____ - _____ - _____	\$ _____ , _____ . _____
s. _____	_____ - _____ - _____	\$ _____ , _____ . _____
t. _____	_____ - _____ - _____	\$ _____ , _____ . _____
u. _____	_____ - _____ - _____	\$ _____ , _____ . _____
v. _____	_____ - _____ - _____	\$ _____ , _____ . _____
w. _____	_____ - _____ - _____	\$ _____ , _____ . _____

10. Total on this page.....10. \$ _____ , _____ , _____ . _____

11. Total for ALL pages (Enter here and on Form 941ME, Line 1).....11. \$ _____ , _____ , _____ . _____